

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087244

**FILED**  
**Apr 28, 2005**  
**Secretary of State**

**Entity Name:** FUN AND MENTAL GOLF INC.

**Current Principal Place of Business:**

920 EAST STREET  
LAKE WALES, FL 33853

**New Principal Place of Business:**

920 EAST STREET  
LAKE WALES, FL 33898

**Current Mailing Address:**

1255 HIGHLAND PARK DRIVE  
LAKE WALES, FL 33853

**New Mailing Address:**

1255 HIGHLAND PARK DRIVE  
LAKE WALES, FL 33898

**FEI Number:** 01-0656104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RIEDEL, CHAD  
1255 HIGHLAND PARK DRIVE  
LAKE WALES, FL 33853 US

**Name and Address of New Registered Agent:**

RIEDEL, CHAD  
1255 HIGHLAND PARK DRIVE  
LAKE WALES, FL 33898 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHAD RIEDEL

04/28/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RIEDEL, CHAD  
Address: 1255 HIGHLAND PARK DRIVE  
City-St-Zip: LAKE WALES, FL 33853

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RIEDEL, CHAD  
Address: 1255 N. HIGHLAND PARK DRIVE  
City-St-Zip: LAKE WALES, FL 33898

Title: VP ( ) Change (X) Addition  
Name: RIEDEL, TODD  
Address: 641 N.E. 8TH COURT  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHAD RIEDEL

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date